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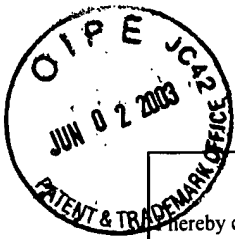
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)		Application Number	09/852,416
		Filing Date	May 9, 2001
		First Named Inventor	Chaitan KHOSLA
		Group Art Unit	1639
		Examiner Name	P. Ponnaluri
Total Number of Pages in This Submission	5	Attorney Docket Number	300622000501

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
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<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Request for Corrected Filing Receipt (2 pages)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	Marked-up copy of Filing Receipt (2 page)
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<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	 <b>25225</b> PATENT, TRADEMARK OFFICE
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	MORRISON & FOERSTER LLP Brenda J. Wallach - 45,193
Signature	<i>Brenda J Wallach</i>
Date	May <u>28</u> , 2003

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: May <u>29</u> , 2003	Signature: <i>Diane Blevins</i> (Diane Blevins)



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PATENT

Docket No. 300622000501

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Diane Blevins

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the application of:

Chaitan KHOSLA et al.

Serial No.: 09/852,416

Filing Date: May 9, 2001

For: MACROLIDE ANALOGS

Examiner: P. Ponnaluri

Group Art Unit: 1639

REQUEST FOR CORRECTED FILING RECEIPT

Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Dear Sir:

Please furnish the undersigned with a corrected Filing Receipt for the above-identified application. The corrections needed are shown in bold below:

Please correct the priority claims as follows:

This application is a CON of  
which is a CIP of  
which is a CIP of  
which is a CIP of  
which is a CIP of  
and claims benefit of  
**This application 09/852,416**  
**is a CIP of**  
which is a CON of  
which is a CIP of

09/073,538 05/06/1998  
08/846,247 04/30/1997  
08/486,645 06/07/1995 PAT 5,712,146  
08/238,811 05/06/1994 PAT 5,672,491  
08/164,301 12/08/1993 ABN  
08/123,732 09/20/1993 ABN  
60/076,919 03/05/1998  
  
09/311,756 05/14/1999  
09/164,306 10/01/1998 ABN  
08/896,323 07/17/1997 PAT 6,066,721

which is a CIP of  
and claims benefit of

08/675,817 07/05/1996 PAT 6,080,555  
60/003,338 07/06/1995


A copy of the marked-up Corrected Filing Receipt is attached.

In the unlikely event that the transmittal letter is separated from this request and the Patent Office determine that a fee is required, application petitions for any required relief including extensions of time and authorizes the Assistant Commissioner to charge the cost of such petitions and/or other fees due in connection with the filing of this document to **Deposit Account No. 03-1952.**

Respectfully submitted,

Dated: May 28, 2003

By:

  
Brenda J. Wallach  
Registration No. 45,193

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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/852,416	05/09/2001	1627	2230	300622000501	22	60	13

CONFIRMATION NO. 5252

CORRECTED FILING RECEIPT



\*OC000000008221761\*

Date Mailed: 06/03/2002

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Chaitan Khosla, Palo Alto, CA;  
 Gary Ashley, Alameda, CA;  
 Hong Fu, Fremont, CA;  
 Camilla M. Kao, Palo Alto, CA;  
 Robert McDaniel, Palo Alto, CA;

\* No Docketing Required \*

Reviewed by Docketing

Initials

## Domestic Priority data as claimed by applicant

THIS APPLICATION IS A CON OF 09/073,538 05/06/1998  
 WHICH IS A CIP OF 08/846,247 04/30/1997 PAT 6,391,594  
 WHICH IS A CIP OF 08/486,645 06/07/1995 PAT 5,712,146  
 WHICH IS A CIP OF 08/238,811 05/06/1994 PAT 5,672,491  
 WHICH IS A CIP OF 08/164,301 12/08/1993 ABN  
 WHICH IS A CIP OF 08/123,732 09/20/1993 ABN  
 AND CLAIMS BENEFIT OF 60/076,919 03/05/1998  
 AND IS A CON OF 09/311,756 05/14/1999  
 WHICH IS A CON OF 09/164,306 10/01/1998 ABN  
 WHICH IS A CIP OF 08/896,323 07/17/1997 PAT 6,066,721  
 WHICH IS A CIP OF 08/675,817 07/05/1996 PAT 6,080,555  
 AND CLAIMS BENEFIT OF 60/003,338 07/06/1995

THIS APPLICATION  
 09/852,416 →

CIP

## Foreign Applications

PCT/US98/14911 07/17/1998

If Required, Foreign Filing License Granted 10/17/2001

Projected Publication Date: 08/08/2002

Non-Publication Request: No

Early Publication Request: No

**Title**

Macrolide analogs

**Preliminary Class**

435

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Title 37, Code of Federal Regulations, 5.11 & 5.15**

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Bib Data Sheet

CONFIRMATION NO. 5252

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/852,416	05/09/2001 RULE	435	1639	300622000501

**APPLICANTS**

Chaitan Khosla, Palo Alto, CA;  
 Gary Ashley, Alameda, CA;  
 Hong Fu, Fremont, CA;  
 Camilla M. Kao, Palo Alto, CA;  
 Robert McDaniel, Palo Alto, CA;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CON of 09/073,538 05/06/1998 PAT 6,558,942  
 which is a CIP of 08/846,247 04/30/1997 PAT 6,391,594  
 which is a CIP of 08/486,645 06/07/1995 PAT 5,712,146  
 which is a CIP of 08/238,811 05/06/1994 PAT 5,672,491  
 which is a CIP of 08/164,301 12/08/1993 ABN  
 which is a CIP of 08/123,732 09/20/1993 ABN  
 and claims benefit of 60/076,919 03/05/1998  
 This application 09/852,416  
 is a CIP of 09/311,756 05/14/1999 PAT 6,500,960  
 which is a CON of 09/164,306 10/01/1998 ABN  
 which is a CIP of 08/896,323 07/17/1997 PAT 6,066,721  
 which is a CIP of 08/675,817 07/05/1996 PAT 6,080,555  
 and claims benefit of 60/003,338 07/06/1995

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

UNITED STATES OF AMERICA PCT/US98/14911 07/17/1998

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 10/17/2001**

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 22	TOTAL CLAIMS 60	INDEPENDENT CLAIMS 13
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

**ADDRESS**  
25225

**TITLE**  
Macrolide analogs

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2230	No. _____ for following:	<div><input type="checkbox"/> 1.18 Fees ( Issue )</div> <div><input type="checkbox"/> Other _____</div> <div><input type="checkbox"/> Credit</div>
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